

ARS for director or

Please co	mplete in	typescript,
or in bold	black cap	oitals.

CHFP010

**Company Number** 

**Company Name in full** 

) or re	esignation (u	se Form	288b)

SC2250	) / 2			
Light	Kits	Limited		

Changes of particulars form

Complete in all cases

Date of change of particulars

Day Month Year

Name

\* Style / Title

Miss

\* Honours etc

Forename(s)

Louise

Surname

Bowey

Month Day

Year

† Date of Birth

2

Change of name

Forename(s)

Louise

(enter new name)

Surname

Blyth

## Change of usual residential address

(enter new address)

Post town

County / Region

Postcode

Country

Other Change

(please specify)

MRS

A serving director, secretary etc must sign the form below.

\* Voluntary details.

† Directors only.

\*\* Delete as appropriate.

Signed

Date

(\*\*director/ secretary/-administrator/ administrative receiver/ receiver manager/-receiver)

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.

Greaves West & Ayre, Chartered Accountants , 1/3 Sandgate, Berwick upon Tweed, Northumberland, TD15 1EW, Tel (01289) 306688

DX number

DX exchange OUR REF: (MMF) LI30 When you have completed and signed the form please send it to the

Registrar of Companies at:

DX 33050 Cardiff Companies House, Crown Way, Cardiff, CF14 3UZ for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh



SCT

15/09/2010

COMPANIES HOUSE